

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 51

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends Of Lois Capps**

Mailing Address P.O. Box 23940

City	State	Zip Code
Santa Barbara	CA	93121

Purpose of Disbursement  
campaign contribution

Candidate Name

**Rep. Lois Capps**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2013

**Transaction ID : 57184353**

Amount of Each Disbursement this Period

1000.00
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campaign contribution

Full Name (Last, First, Middle Initial)

**B. Shelley Moore Capito For Congress**

Mailing Address P.O. Box 11519

City	State	Zip Code
Charleston	WV	25339

Purpose of Disbursement  
campaign contribution

Candidate Name

**Rep. Shelley Moore Capito**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WV District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2013

**Transaction ID : 57184354**

Amount of Each Disbursement this Period

2500.00
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campaign contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of John Barrow**

Mailing Address PO Box 1001

City	State	Zip Code
Augusta	GA	30903

Purpose of Disbursement  
campaign contribution

Candidate Name

**Rep. John Barrow**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2013

**Transaction ID : 57184355**

Amount of Each Disbursement this Period

1000.00
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campaign contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00
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